Conference

After Montreal, international AIDS conferences will never be the same

James Hale

he size and complexity of the Fifth International Conference on AIDS, held in Montreal June 4-9, parallelled the dimensions of the disease itself.

Conference organizers — the Canadian International Development Research Centre (IDRC), the Department of National Health and Welfare, the World Health Organization (WHO), and the International AIDS Society — had expected 10 000 delegates. They had to shut down registration on the first full day, with attendance fast approaching 12 000.

The overflow pushed facilities at the Palais de Congrès and the adjacent Guy Favreau Complex past capacity and led to long waits for everything from information to currency exchange. Many sessions were filled well before the scheduled starting times, forcing latecomers to search out closed-circuit monitors. More than once the audio portion of those broadcasts failed to function, leading to frustration and anger among some delegates.

In fact, those emotions were never far from the surface throughout this event.

The tone was set at the opening ceremonies by Dr. Jonathan Mann, director of WHO's global AIDS program, who stated that the global outlook for AIDS in the coming decade will likely

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be bleaker than in the 1980s, perhaps much bleaker. By the year 2000 six million people will likely have full-blown AIDS; most of them will be in the Third World. Keynote speaker Kenneth Kaunda, president of Zambia, pressed home the same theme, calling AIDS "a bomb ... [with] the potential to reverse the significant gains that medical science has [achieved]". He talked about his son's death from the disease and called for the world's nuclear powers to divert weapons spending into AIDS research.

A more tangible — and the most vociferous - anger was expressed by the New York Citybased AIDS Coalition to Unleash Power, better known by its wholly appropriate acronym, ACT UP. About 200 of its members and their supporters commandeered the stage at the opening, postponing Prime Minister Brian Mulroney's address by an hour as they issued the so-called Montreal Manifesto, listing demands for PWAs — persons with AIDS. Members of ACT UP also crashed a Monday afternoon press conference to pepper New York City Health Commissioner Stephen Joseph with questions about statements attributed to him by the New York Post. When his answers didn't satisfy them, they hissed and jeered.

That press briefing symbolized how the conference became dominated by concerns about AIDS treatment in the United States. While ACT UP members and American journalists contin-

ued to seek clarification from Joseph about protecting the civil rights of carriers of the human immunodeficiency virus (HIV) in New York, other panellists, including Health and Welfare Deputy Minister Maureen Law, Thai AIDS specialist Mechai Viravaidya, and French geneticist Albert Jacquard sat waiting for questions that never came. The Tuesday press conference was similarly dominated by questions to James Mason, the American assistant secretary of health.

Part of this domination was a natural result of the conference's physical proximity to the US and the large number of American journalists among the 1059 reporters in attendance, but it also demonstrated the difficulty of dealing with the rapidly changing face of AIDS in other parts of the world. Although North American journalists and their audiences have had almost a decade to come to grips with AIDS as a disease that is most prevalent among homosexual men, they are not well versed about additional problems: the spread of HIV among heterosexuals, gay women and intravenous drug users, and from mother to fetus.

Those topics and others were discussed at a total of almost 300 sessions that ran concurrently at three separate times each day of the conference. Each session was chaired by eminent researchers and featured several presentations of abstracts. The sessions were divided into eight catego-

ries: epidemiology and public health; clinical aspects; basic research (biomedical); AIDS and the individual; AIDS, society and behaviour; ethics and law; international issues; and the economic impact of AIDS. Those abstracts not tabled in public sessions were presented during daily poster sessions; in all, more than 3500 papers were delivered.

Seminar participants learned that stopping the spread of the virus throughout the rest of the world presents problems never before encountered. Members of various panels discussed the difficulties in introducing safe-sex practices in societies where sex is a taboo subject, of offering needle-exchange programs in US ghettoes where cultural leaders preach that it is a means for a white racist government to keep the black and Hispanic communities on drugs, and of how the

Ugandan government considers it tantamount to genocide to advise HIV-positive women to refrain from bearing children.

The secondary concerns relating to the global crisis in public health — the costs — are themselves overwhelming. If Jonathan Mann's prognosis for the spread of AIDS in the 1990s is chilling, the anticipation of the costs around the world is no less so. Simply put, the Third World does not have enough money to purchase the types of AIDS treatments discussed at this conference. Seminars on the cost of treating AIDS in developing countries revealed that economists are still establishing models to enable them to project costs into the next decade.

Other sessions struck a more positive note. A particularly popular and informative one took the form of a round-table discussion on epidemiology entitled "Analysis of Public Health Policy for the Prevention of AIDS: Where Have We Gone Wrong? Where Do We Go From Here?" Co-chaired by Dr. Donald Francis of the Centers for Disease Control in Atlanta. and a Swiss health official, Bertino Somaini, the panel featured John Watters, who runs a needleexchange program for IV drug users in San Francisco, and Randy Shilts, the San Francisco Chronicle reporter who wrote And the Band Played On, widely regarded as the definitive book about the spread of AIDS in North America.

Francis spoke powerfully of the need to draw together the "world family" to combat AIDS and cut through bureaucratic red tape to provide treatment; even ACT UP members applauded.

Shilts provided a succinct history of how he believes the

Canapress



Activists took the spotlight off science and aimed it at social issues

US government has bungled the AIDS crisis, culminating in President Ronald Reagan's decision to designate last October AIDS Awareness Month, but his failure to sign the appropriate bill until Oct. 28 and his office's failure to announce the designation until well into November.

Watters stressed the need for street-level programs that attack the problem at the source. What's the point of providing a needleexchange program, he asked, if you don't offer it in neighbourhoods where drug users congregate?

Somaini presented a visual tour of Switzerland's graphic AIDS-education campaign, including a novel approach for marketing condoms that flies in the face of convention in his normally conservative homeland. This hard-hitting campaign is directed at the middle class and is a visual attempt to make the condom a "sexy" product, just like cologne and numerous other items.

The visual attack on AIDS in other parts of the world was on display at SIDART exhibitions at several locations in downtown Montreal. As expressions of cultural communication, the posters and print advertisements illustrated that Canadians and Americans have not mustered much imagination in putting the anti-AIDS message across.

Opposite the main conference hall, videos were screened in the National Film Board theatre at the Guy Favreau Complex. One session, on women and AIDS, included videos that ranged from the outrageous Safe Sex Slut, by San Francisco prostitute Carol Leigh, to the tragic story of Cori Sobell, a 4-year-old who was infected with HIV during a blood transfusion. Also featured was a provocative piece by ACT UP members, Doctors, Liars and Women, which documented their fight against Cosmopolitan magazine and a US psychiatrist who wrote an article stating that heterosexual women were not threatened by AIDS.

Inside the conference centre, delegates wandered through dis-

play booths set up by more than 100 commercial exhibitors, ranging from the City of San Francisco to major international pharmaceutical manufacturers.

The conference produced a few news-making medical announcements. Topping the list was a presentation by Dr. Jonas Salk, cofounder of polio vaccine. He captured media attention by announcing that his institute's HIV vaccine tests involving chimpanzees have been successful. Although preliminary tests on humans have proven inconclusive, Salk was optimistic that a vaccine protecting against the virus is a possibility.

Mason, the assistant health secretary in the US, expressed confidence that AIDS will eventually become a manageable disease, like diabetes. Regardless of the outcome of current research, though, he predicted that the AIDS experience will "substantially and permanently change how we test drugs".

Perhaps the most encouraging medical signs were the number of small steps towards a control, if not an outright cure. Several papers detailed positive results from tests of the antiviral drugs azidothymidine (AZT, or zidovudine) and pentamidine, which is used in aerosol form to prevent *Pneumocystis carinii* pneumonia in AIDS patients.

Canada's Federal Centre for AIDS had distressing news, though. It reported that four cases of HIV-2 infection have been diagnosed in the country. [CMAJ reported the first two cases in its Jan. 15 issue. See CMAJ 1989; 140: 125–128 — Ed.] This retrovirus is more difficult to detect than the more common HIV-1.

No major policy announcements were made by Canadian officials. Neither the prime minister nor Health Minister Perrin Beatty, who spoke at the closing ceremony, committed Canada to any specific AIDS programs. Beatty, who sources say is in favour of stepping up the fight against AIDS, said that "governments must care", and called for a national strategy on AIDS, al-

though no funding is likely to be forthcoming immediately.

The government's failure to put forward anything concrete resulted in some tough shots from a number of outspoken critics. Speaking at the first day's plenary session, broadcaster David Suzuki said: "As a scientist, I am ashamed of the Canadian government's lack of a serious, coherent response to AIDS."

But the Canadians did succeed in their role as hosts. Faced with massive overcrowding and protestors who had been schooled on the streets of Manhattan, IDRC president Ivan Head and his staff never lost control. The organizers achieved their goal of ensuring that scientists, physicians and journalists from developing countries were an integral part of the congress, although it remained in the hands of ACT UP and their Canadian supporters to shift the spotlight to those infected with HIV.

The 1990 conference is set for next June 20-24 in San Francisco, where it is estimated that as many as one in five residents is HIV positive; AIDS activists are demanding that the political ramifications of the disease be included in the program there. Conference organizers at the University of California, San Francisco, will have to strike a balance between the activists and the scientists, who criticized the amount of social content in the Montreal program.

One thing is definite: after Montreal, the International Conference on AIDS will never be the same. The demonstrations and the "Montreal Manifesto" will have the same effect on the complexion of future conferences that the raised fists of radical black US sprinters Tommie Smith and John Carlos had on Olympic Games held after 1968. Any event that draws sustained international media attention inevitably becomes a political forum. The Olympics have not been just a sports event since Mexico City, and the AIDS conference will never again be confined to medicine.